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| Fill in this information to identify your case: | | |
|---|-------------------------------|--|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--|--|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licer Brin iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your thing with the trustee. | Deneen First name C Middle name Avery Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-2921 | |

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Debtor 1 Deneen C Avery

| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
|------------|---|---|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | - | ☐ I have not used any business name or EINs. Business name(s) |
| | | EINs | | EINs |
| 5. | Where you live | 2816 Lexington Dr | | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | - | Number, Street, City, State & ZIP Code |
| | | Cook | _ | 0 |
| | | County | | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | _ | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | | Check one: |
| bankruptcy | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | | |

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Case number (if known) Debtor 1 Deneen C Avery

| ⊃ar | t 2: Tell the Court About | Your Ba | ankruptcy Ca | ise | | | | | |
|-----|--|-----------|---|--|--|--|----|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | each, see <i>Notice Required by</i> age 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. | | | |
| | choosing to file under | Chapter 7 | | | | | | | |
| | | ☐ Ch | hapter 11 | | | | | | |
| | | ☐ Ch | hapter 12 | | | | | | |
| | | ☐ Ch | hapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | _ | about how yo | ou may pay. Typica attorney is submit | ally, if you are paying the fee yo | k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with | У | | |
| | | | I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). | | | | | | |
| | | | but is not req applies to you | uired to, waive you ur family size and y | ur fee, and may do so only if yo you are unable to pay the fee ir | n only if you are filing for Chapter 7. By law, a judge may ur income is less than 150% of the official poverty line th n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition. | at | | |
| 9. | Have you filed for bankruptcy within the | ■ No |). | | | | | | |
| | last 8 years? | ☐ Ye | s. | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 10. | Are any bankruptcy | ■ No |) | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | es. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your | ■ No | Go to I | ine 12. | | | | | |
| | residence? | ☐ Ye | s. Has yo | our landlord obtaine | ed an eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petitic | | Judgment Against You (Form 101A) and file it with this | | | |

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| | | Document | Page 4 of 46 | |
|----------|----------------|----------|------------------------|--|
| Debtor 1 | Deneen C Averv | | Case number (if known) | |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | |
|------|---|------------------------|---|---------------------------------------|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of business | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State & ZIF | ² Code | | |
| | it to this petition. | | Check | the appropriate box to de- | scribe your business: | | |
| | | | | Health Care Business (as | s defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real Estate | (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as defined i | n 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broker (as de | efined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu. U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chapter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | ing under Chapter 11 and | I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Part | 4: Report if You Own or | Have Anv | Hazardo | us Property or Any Prop | erty That Needs Immediate Attention | | |
| | Do you own or have any | | | | | | |
| 17. | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is | ne hazard? | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | er, Street, City, State & Zip Code | | |
| | | | | | | | |

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Debtor 1 Deneen C Avery

en C Avery Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Deneen C Avery | 23209 | D00 1 | Document | Page 6 of 46 | Case number (if known) | Desc Main | |
|------|---|--------------------|--|---|--|------------------------|---|--|
| Part | 6: Answer These Quest | ions for R | Reporting Purr | poses | | | | |
| | What kind of debts do you have? | 16a. | Are your del | | | | U.S.C. § 101(8) as "incurred by an | |
| | , | | □ No. Go to | • | ,, | - | | |
| | | | Yes. Go to | to line 17. | | | | |
| | | 16b. | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to | line 16c. | | | | |
| | | | ☐ Yes. Go to | to line 17. | | | | |
| | | 16c. | State the type | e of debts you owe that | are not consumer debts | s or business debts | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filinç | g under Chapter 7. Go t | o line 18. | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses | ■ Yes. | | nder Chapter 7. Do you of tunds will be available | | | cluded and administrative expenses | |
| | | | ■ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | □Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | 1 -49 | | | 1 ,000-5,000 | | 25,001-50,000 | |
| | | □ 50-99 | | | □ 5001-10,000 □ 10,001-25,000 | | 50,001-100,000 | |
| | | ☐ 100-1 ☐ 200-9 | | 1 | □ 10,001-25,000 | ш | More than100,000 | |
| 19. | How much do you | □ \$0 - \$ | \$50,000 | J | □ \$1,000,001 - \$10 mill | ion 🔲 S | \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | | 001 - \$100,000 | | □ \$10,000,001 - \$50 m | | \$1,000,000,001 - \$10 billion | |
| | | | ,001 - \$500,000 ,001 - \$1 millio | ,0 | □ \$50,000,001 - \$100 r □ \$100,000,001 - \$500 | | \$10,000,000,001 - \$50 billion More than \$50 billion | |
| 20. | How much do you | \$0 - \$ | \$50,000 | | □ \$1,000,001 - \$10 mill | | \$500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | | 001 - \$100,000 | _ | □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 r | | \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion | |
| | | | ,001 - \$500,000 ,001 - \$1 millio | ,0 | □ \$100,000,001 - \$100 T | | More than \$50 billion | |
| Part | :7: Sign Below | | | | | | | |
| For | you | I have ex | xamined this po | etition, and I declare un | der penalty of perjury th | at the information pro | ovided is true and correct. | |
| | | | | | | | napter 7, 11,12, or 13 of title 11, proceed under Chapter 7. | |
| | | | | its me and I did not pay ined and read the notice | | | ney to help me fill out this | |
| | | I reques | t relief in accor | rdance with the chapter | of title 11, United States | Code, specified in the | is petition. | |
| | | bankrup and 357 | tcy case can re | esult in fines up to \$250 | | | by fraud in connection with a sooth. 18 U.S.C. §§ 152, 1341, 1519 | |
| | | Deneer | n C Avery re of Debtor 1 | 1 | Signatu | re of Debtor 2 | | |

Executed on

MM / DD / YYYY

Executed on August 1, 2017 MM / DD / YYYY

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Debtor 1 Deneen C Avery

Debtor 1 Deneen C Avery

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Steven L Walk | er | Date | August 1, 2017 | | | | |
|---------------------------------|------------|---------------|-----------------------|--|--|--|--|
| Signature of Attorne | for Debtor | | MM / DD / YYYY | | | | |
| Steven L Walker | | | | | | | |
| | | | | | | | |
| Printed name | | | | | | | |
| Lynch Law Office | es, P.C. | | | | | | |
| Firm name | | | | | | | |
| 1011 Warrenville Road, Ste. 150 | | | | | | | |
| Lisle, IL 60532 | • | | | | | | |
| Number, Street, City, State | & ZIP Code | | | | | | |
| Contact phone 630-9 | 60-4700 | Email address | SWalker@Lynch4Law.Com | | | | |
| 6325928 | | | | | | | |
| Bar number & State | | | | | | | |

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| | Debtor 1 | Deneen C Avery | | |
|---|-----------------------------|--------------------------|-------------------|-------------|
| Spouse if, filing) First Name Middle Name Last Name | | First Name | Middle Name | Last Name |
| | Debtor 2 | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | (Spouse if, filing) | First Name | Middle Name | Last Name |
| | United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |
| | Case number _ (if known) | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 11: Summarize Your Assets | | |
|-----|--|--------------|--------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 73,110.12 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 73,110.12 |
| Par | 12: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 12,046.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 26,136.00 |
| | Your total liabilities | \$ | 38,182.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,894.35 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,039.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a nerconal | family or |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Deneen C Avery

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form | E E40 00 |
|----|--|----------------|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ 5,516.62 |
| | | |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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|---------------------------------|--|---|--|---|--|--|
| Fill in | this informa | ation to identify your | case and this filing: | | | |
| Debtor | · 1 | Deneen C Avery | | | | |
| | | First Name | Middle Name | Last Name | | |
| Debtor | | First Name | Middle Name | Last Name | | |
| (Spouse, | , ii iiiiig) | riist Name | wilddie Name | Last Name | | |
| United | States Bank | cruptcy Court for the: | NORTHERN DISTRI | CT OF ILLINOIS | | |
| Case r | number | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| | | | | | | _ |
| ∪ π: ¹ | ial Fam | 40CA/D | | | | |
| - | | m 106A/B | | | | |
| Sch | redule | · A/B: Prop | erty | | | 12/15 |
| think it f informa Answer | fits best. Be tion. If more severy question. | as complete and accura space is needed, attach on. | ite as possible. If two ma a separate sheet to this | rried people are filing togethe form. On the top of any addition | re than one category, list the as r, both are equally responsible onal pages, write your name ar | for supplying correct |
| Part 1: | Describe Ea | ach Residence, Building | ر, Land, or Other Real Es | tate You Own or Have an Inter | est In | |
| 1. Do y o | ou own or ha | ve any legal or equitable | e interest in any residen | ce, building, land, or similar pr | operty? | |
| = N | o Go to Part 2 | | | | | |
| _ | | • | | | | |
| L Y€ | es. Where is t | he property? | | | | |
| Part 2: | Describe Yo | our Vehicles | | | | |
| | s, vans, truc | • | le, also report it on Scl | edule G: Executory Contract | 's and Unexpired Leases. | |
| 3.1 | Make: H e | onda | Who has an i | nterest in the property? Check o | | ured claims or exemptions. Put |
| | Model: A | ccord | ■ Debtor 1 o | nly | | secured claims on Schedule D: ve Claims Secured by Property. |
| | Year: 20 |)14 | Debtor 2 o | nly | Current value of t | the Current value of the |
| | Approximate | | .360 Debtor 1 a | nd Debtor 2 only | entire property? | portion you own? |
| _ | Other informa | | | e of the debtors and another | | |
| | value via (2017 | CarMax on July 15 | | nis is community property | \$15,000 | .00 \$15,000.00 |
| Ľ | 2017 | | (see instruc | | <u> </u> | |
| Exam N Y Add pag Part 3: | nples: Boats o es d the dollar ges you hav | , trailers, motors, personal value of the portion ye attached for Part 2. | onal watercraft, fishing you own for all of you Write that number ho | tional vehicles, other vehic vessels, snowmobiles, moto or entries from Part 2, includere | rcycle accessories | \$15,000.00 Current value of the |
| | | ds and furnishings | | | | portion you own? Do not deduct secured claims or exemptions. |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

| Dobtor 1 | | Doc 1 | Filed 08/04/17 Document | Entered 08/04/17 08:28:0 Page 11 of 46 | |
|---------------------------|--|-----------------------------|----------------------------|---|---------------------------------------|
| Debtor 1 | Deneen C Avery | | | Case number (if known | νn) |
| Yes. | Describe | | | | |
| | | ousehold C zel Crest, II | | located at 2816 Lexington | \$325.00 |
| □No | | | | pment; computers, printers, scanners; mus | ic collections; electronic devices |
| | Misc. E 60429. | Electronics | located at 2816 Lex | ington Dr., Hazel Crest, IL | \$220.00 |
| Exampl ■ No | bles of value les: Antiques and figurines; other collections, memo | | | oks, pictures, or other art objects; stamp, c | oin, or baseball card collections; |
| Exampl | ent for sports and hobbie les: Sports, photographic, e musical instruments Describe | | other hobby equipment; | bicycles, pool tables, golf clubs, skis; cand | es and kayaks; carpentry tools; |
| ■ No | ns bles: Pistols, rifles, shotgun Describe | s, ammunition | n, and related equipmen | t | |
| □ No [′] | s bles: Everyday clothes, furs Describe | , leather coat | s, designer wear, shoes | , accessories | |
| | Person | al Clothing | g of Debtor | | \$250.00 |
| ■ No | | tume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, gem | ıs, gold, silver |
| Exam _l ■ No | orm animals oles: Dogs, cats, birds, hors Describe | ses | | | |
| ■ No | her personal and househ | - | u did not already list, i | ncluding any health aids you did not lis | |
| | the dollar value of all of yo art 3. Write that number h | | | ny entries for pages you have attached | \$795.00 |
| | scribe Your Financial Assets | | | | |
| Do you ov | vn or have any legal or eq | juitable inter | est in any of the follow | /ing? | Current value of the portion you own? |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

| Debtor 1 | Deneen C Avery | Doo | eument Page 12 of 46 | Case number (if known) | |
|-----------------------|--|--|--|----------------------------------|----------------------|
| □ No | nples: Money you have in | | in a safe deposit box, and on hand w | hen you file your petition | |
| | | | | Cash on Hand | \$40.00 |
| <i>Exam</i> □ No | | | s; certificates of deposit; shares in cre n the same institution, list each. Institution name: | dit unions, brokerage houses, ar | nd other similar |
| | 17.1 | . Checking #6732 | First Midwest Bank | | \$720.00 |
| | 17.2 | Savings #3379 | First Midwest Bank | | \$1,000.00 |
| | 17.3 | . Savings #5244 | First Midwest Bank | | \$730.00 |
| joint ■ No □ Yes | venture . Give specific informatio N | n about themame of entity: | ed and unincorporated businesses | % of ownership: | .o, partiersinp, and |
| Nego Non-i ■ No | ntiable instruments include negotiable instruments are Give specific information | e personal checks, cashie e those you cannot transf | ole and non-negotiable instruments is checks, promissory notes, and more to someone by signing or delivering | ney orders. | |
| <i>Exam</i> □ No | | RISA, Keogh, 401(k), 403(| o), thrift savings accounts, or other pe | nsion or profit-sharing plans | |
| ■ Yes | List each account separ Type | ately. e of account: | Institution name: | | |
| | 401 | (k) | Live Nation Entertainment, In | nc. | \$52,692.00 |
| Your Exam ■ No | nples: Agreements with la | sits you have made so the | t you may continue service or use from | | ners |
| | ition (A contract for a new | adia normant of society | Institution name or individual: | via a ra) | |
| ■ No | | me and description. | you, either for life or for a number of | years) | |
| | sts in an education IRA, S.C. §§ 530(b)(1), 529A(b) | | fied ABLE program, or under a qua | lified state tuition program. | |

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| | Case 17-23289 | Doc 1 | | Entered 08/04/17 08:28:07 | Desc Main | | | |
|---|---|----------------|---|--|---|--|--|--|
| Debtor 1 | Deneen C Avery | | Document | Page 13 of 46 Case number (if known) | | | | |
| ■ No □ Yes. | Institution na | ame and desc | cription. Separately file th | ne records of any interests.11 U.S.C. § 521(c) | : | | | |
| | , equitable or future intere | ests in prope | erty (other than anythin | g listed in line 1), and rights or powers exc | ercisable for your benefit | | | |
| ■ No □ Yes. | Give specific information a | bout them | | | | | | |
| <i>Exam</i> ■ No | s, copyrights, trademarks ples: Internet domain names Give specific information a | s, websites, p | | | | | | |
| 27. Licenses, franchises, and other general intangibles | | | | | | | | |
| ■ No | oles: Building permits, exclu | | , cooperative association | n holdings, liquor licenses, professional licens | es | | | |
| Money or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | |
| ■ No | funds owed to you Give specific information al | bout them, in | cluding whether you alre | ady filed the returns and the tax years | | | | |
| | | | | | | | | |
| ■ No | | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement | | | |
| Exam _i ■ No | amounts someone owes yoles: Unpaid wages, disabili benefits; unpaid loans Give specific information | ty insurance | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security | | | |
| 31. Interes | sts in insurance policies | | | | | | | |
| <i>Exam</i> _l □ No | ples: Health, disability, or life | e insurance; I | nealth savings account (| HSA); credit, homeowner's, or renter's insura | nce | | | |
| ■ Yes. | s. Name the insurance company of eac Company nam | | olicy and list its value. | Beneficiary: | Surrender or refund value: | | | |
| | | | ciable Life # 987620 Policy \$9,050.35 | 75 Clarence Avery, Derrick Avery & Donald Avery | \$2,133.12 | | | |
| If you somed | one has died. | | | ed surance policy, or are currently entitled to rec | eive property because | | | |
| ⊔ Yes. | Give specific information | | | | | | | |
| | s against third parties, who ples: Accidents, employmen | | | it or made a demand for payment to sue | | | | |
| ☐ Yes. | Describe each claim | | | | | | | |
| ■ No | contingent and unliquidat | ed claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims | | | |
| 1 1 1/ | Describe each claim | | | | | | | |

| Debt | or 1 | Case 17-23289 Deneen C Avery | Doc 1 | Filed 08/04/17 Document | Entered 08 Page 14 of | 8/04/17 08:28:07 46 Case number (if known) | Desc Main |
|----------------|--------|--|--------------------------|----------------------------|--------------------------|--|-------------------------|
| 35. A | ny fin | ancial assets you did not | already list | | | , | |
| | No | • | • | | | | |
| | Yes. | Give specific information | | | | | |
| | | he dollar value of all of yo art 4. Write that number he | | | | | \$57,315.12 |
| Part 5 | 5: Des | scribe Any Business-Related | Property You | Own or Have an Interest | In. List any real esta | ite in Part 1. | |
| 37. D o | you c | own or have any legal or equi | table interest i | n any business-related p | roperty? | | |
| | No. Go | to Part 6. | | | | | |
| | Yes. G | Go to line 38. | | | | | |
| Part 6 | | scribe Any Farm- and Comme ou own or have an interest in fa | | | n or Have an Interes | st In. | |
| 46. D | o you | own or have any legal or | equitable in | terest in any farm- or | commercial fishin | g-related property? | |
| I | No. | Go to Part 7. | | | | | |
| [| ☐ Yes. | . Go to line 47. | | | | | |
| Part 7 | 7: | Describe All Property You (| Own or Have a | n Interest in That You Did | l Not List Above | | |
| | | have other property of an oles: Season tickets, country | | | | | |
| | No | | | | | | |
| | Yes. | Give specific information | | | | | |
| 54. | Add t | he dollar value of all of yo | our entries fro | om Part 7. Write that n | umber here | | \$0.00 |
| Part 8 | 3: | List the Totals of Each Part of | of this Form | | | ' | |
| | Dort 1 | : Total real estate, line 2 | | | | | #0.00 |
| | | 2: Total vehicles, line 5 | | | | | \$0.00 |
| | | 3: Total personal and hous | sahold itams | | \$15,000.00 \$795.00 | | |
| | | l: Total financial assets, li | | | \$57,315.12 | | |
| | | 5: Total business-related p | | | \$0.00 | | |
| | | 6: Total farm- and fishing- | | | \$0.00 | | |
| | | 7: Total other property not | | | \$0.00 | | |
| | | personal property. Add lin | | | \$73,110.12 | Copy personal property to | otal \$73,110.12 |
| 63. | Total | of all property on Schedu | ı le A/B . Add li | ne 55 + line 62 | | | \$73,110.12 |
| | | | | | | | · |

Official Form 106A/B Schedule A/B: Property page 5 Case 17-23289 Doc 1 Filed 08/04/17 Entered 08/04/17 08:28:07 Desc Main

| Fill in this infor | rmation to identify your | case: | | |
|---|--------------------------|-------------------|-------------|--|
| Debtor 1 | Deneen C Avery | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|--------------------------------------|--|---|--|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| \$15,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$15,000.00 | | \$554.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$325.00 | | \$325.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$220.00 | | \$220.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$250.00 | | \$250.00 | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$15,000.00 \$15,000.00 \$15,000.00 \$120.00 | \$15,000.00 | \$15,000.00 \$15,000.00 \$15,000.00 \$15,000.00 \$100% of fair market value, up to any applicable statutory limit \$15,000.00 \$2,400.00 \$554.00 \$325.00 \$325.00 \$325.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$220.00 \$220.00 \$250.00 \$250.00 \$250.00 \$250.00 |

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| | Zin Zonoon C Mony | | | | |
|----|--|--|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | | ount of the exemption you claim eck only one box for each exemption. | Specific laws that allow exemption |
| | Cash on Hand Line from Schedule A/B: 16.1 | \$40.00 | | \$40.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | Checking #6732: First Midwest Bank Line from Schedule A/B: 17.1 | \$720.00 | ■ | \$720.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | Savings #3379: First Midwest Bank Line from Schedule A/B: 17.2 | \$1,000.00 | | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | Savings #5244: First Midwest Bank Line from Schedule A/B: 17.3 | \$730.00 | | \$730.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | 401(k): Live Nation Entertainment, Inc. Line from Schedule A/B: 21.1 | \$52,692.00 | | \$52,692.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1006 |
| | Variable Appreciable Life # 98762075 - Loan against Policy \$9,050.35 Beneficiary: Clarence Avery, Derrick Avery & Donald Avery Line from Schedule A/B: 31.1 | \$2,133.12 | | \$2,133.12 100% of fair market value, up to any applicable statutory limit | 215 ILCS 5/238 |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covers □ No | 3 years after that for ca | ases fi | · | , |

☐ Yes

| Case | 17-23289 | Doc 1 Filed 08/04/17 Document | Page 17 | d 08/04/17 08:2 of 46 | 28:07 Desc M | iaiii |
|---|---|---|---------------------------------|---|--|-----------------------------|
| Fill in this informati | on to identify you | | | 77 77 | | |
| | Deneen C Avery | y Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankro | uptcy Court for the | NORTHERN DISTRICT OF ILI | LINOIS | | | |
| Case number | | | | | | if this is an led filing |
| Official Form 1 Schedule D | | Who Have Claims | Secured | l by Property | / | 12/15 |
| | | If two married people are filing togeth out, number the entries, and attach it | | | | |
| . Do any creditors hav | e claims secured b | y your property? | | | | |
| □ No. Check thi | s box and submit t | his form to the court with your other | r schedules. Yo | ou have nothing else to | report on this form. | |
| Yes. Fill in all | of the information | below. | | | | |
| Part 1: List All S | ecured Claims | | | | | |
| | | more than one secured claim, list the cre | | Column A | Column B | Column C |
| | | s a particular claim, list the other creditor ical order according to the creditor's nam | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| | Auto Finance | Describe the property that secures | the claim: | \$12,046.00 | \$15,000.00 | \$0.00 |
| Creditor's Name | | 2014 Honda Accord 36,360 Value Via CarMax on July 1 | | | | |
| | | value via Cariviax Oil July 1 | 5, 2017 | | | |
| Attn: Bankru Po Box 3028 | 5 | As of the date you file, the claim is: apply. | | | | |
| Po Box 3028 Salt Lake Cit | 5 y, UT 84130 | As of the date you file, the claim is: apply. Contingent | | | | |
| Po Box 3028 | 5 y, UT 84130 | As of the date you file, the claim is: apply. Contingent Unliquidated | | | | |
| Po Box 3028 Salt Lake Cit | y, UT 84130 y, State & Zip Code | As of the date you file, the claim is: apply. Contingent Unliquidated Disputed | | | | |
| Po Box 3028 Salt Lake Cit Number, Street, City Who owes the debt? Debtor 1 only | y, UT 84130 y, State & Zip Code | As of the date you file, the claim is: apply. Contingent Unliquidated | Check all that | ured | | |
| Po Box 3028 Salt Lake Cit Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only | 5 y, UT 84130 v, State & Zip Code Check one. | As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) | Check all that | ured | | |
| Po Box 3028 Salt Lake Cit Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debto | 5 y, UT 84130 r, State & Zip Code Check one. | As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me | Check all that | ured | | |
| Po Box 3028 Salt Lake Cit Number, Street, City Who owes the debt? Debtor 1 only Debtor 2 only | y, UT 84130 v, State & Zip Code Check one. | As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) | mortgage or sectechanic's lien) | ured Money Security | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$12,046.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$12,046.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | | Document | Page 18 of | 46 | | |
|------------------------|--|---|--|--|--------------------------|-----------------------|--------------------|
| Fill in t | his information to ide | entify your case: | | | | | |
| Debtor | 1 Deneen | C Avery | | | | | |
| | First Name | | iddle Name | Last Name | | | |
| Debtor | | | alde News | Last Name | | | |
| (Spouse if | f, filing) First Name | Mi | iddle Name | Last Name | | | |
| United : | States Bankruptcy Co | urt for the: NORTI | HERN DISTRICT OF IL | LINOIS | | | |
| Case n | umber | | | | | | |
| (if known) | | | | | | ☐ Check | if this is an |
| | | | | | | amend | ded filing |
| ⊃ffi⇔i | ol Form 106F/F | - | | | | | |
| | al Form 106E/F | - | ava Haaaavuad | Claima | | | 40/4E |
| | | | ave Unsecured or creditors with PRIORIT | | | | 12/15 |
| Schedule eft. Attac | e D: Creditors Who Have | e Claims Secured by P ge to this page. If you I | es (Official Form 106G). I roperty. If more space is have no information to re | needed, copy the Part | you need, fill it out, | number the entries i | n the boxes on the |
| Part 1: | List All of Your Pi | RIORITY Unsecured | Claims | | | | |
| 1. Do a | any creditors have prior | ity unsecured claims a | against you? | | | | |
| | No. Go to Part 2. | | | | | | |
| | Yes. | | | | | | |
| iden poss | ntify what type of claim it is sible, list the claims in alp | s. If a claim has both pri- habetical order accordir | litor has more than one priority and nonpriority amouring to the creditor's name. If aim, list the other creditors | nts, list that claim here a f you have more than tw | and show both priority a | and nonpriority amoun | ts. As much as |
| (For | an explanation of each ty | pe of claim, see the ins | structions for this form in the | e instruction booklet.) | | | |
| | | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Illinois Departmer | nt of Revenue | Last 4 digits of accou | ınt number | \$0.00 | \$0.00 | \$0.00 |
| | Priority Creditor's Name | | | | - | · · | |
| | Bankruptcy Section PO Box 64338 | on | When was the debt in | ncurred? | | - | |
| | Chicago, IL 60664 | -0338 | | | | | |
| - | Number Street City State | | As of the date you file | e, the claim is: Check a | all that apply | | |
| WI | ho incurred the debt? C | heck one. | ☐ Contingent | | | | |
| | Debtor 1 only | | ☐ Unliquidated | | | | |
| | Debtor 2 only | | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 o | nly | Type of PRIORITY un | secured claim: | | | |
| | At least one of the debto | rs and another | ☐ Domestic support of | obligations | | | |
| | Check if this claim is fo | or a community debt | Taxes and certain of | other debts you owe the | government | | |
| | the claim subject to offs | = | Claims for death or | personal injury while yo | ou were intoxicated | | |
| | l _{No} | | Other. Specify | | | | _ |

Notice Only

☐ Yes

Best Case Bankruptcy

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| Debt | or 1 Deneen C Avery | | Case number (if know) | |
|---------|--|--|---|----------------------------|
| 2.2 | Internal Revenue Service (IRS) Priority Creditor's Name | Last 4 digits of account number | \$0.00 | \$0.00 |
| | PO Box 7346 Philadelphia, PA 19101-7346 | when was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim | : | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | |
| | ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts you | owe the government | |
| | Is the claim subject to offset? | ☐ Claims for death or personal injury | while you were intoxicated | |
| | ■ No | ☐ Other. Specify | | |
| | Yes | Notice Only | | |
| Part | 2: List All of Your NONPRIORITY Unsecu | red Claims | | |
| | o any creditors have nonpriority unsecured claim | | | |
| _ | ☐ No. You have nothing to report in this part. Submit | | adulas | |
| | • • • | this form to the court with your other schi | edules. | |
| ı | Yes. | | | |
| u tl | ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each c nan one creditor holds a particular claim, list the other lart 2. | laim. For each claim listed, identify what | type of claim it is. Do not list claims already i | ncluded in Part 1. If more |
| | | | | Total claim |
| 4.1 | Barclays Bank Delaware | Last 4 digits of account number | 8076 | \$1,635.00 |
| | Nonpriority Creditor's Name | _ | | · , |
| | 100 S West St Wilmington, DE 19801 | When was the debt incurred? | Opened 06/13 Last Active 01/16 | <u> </u> |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | : |
| | No | Debts to pension or profit-sharir | on plans, and other similar debte | |
| | ■ No □ Yes | | _ | |
| | L res | Other Specify Credit Card | i e e e e e e e e e e e e e e e e e e e | |

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Case number (if know) Debtor 1 Deneen C Avery 4.2 \$2,215.00 **Chase Card** Last 4 digits of account number 7614 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 07/05 Last Active Po Box 15298 When was the debt incurred? 7/02/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 Citibank/Best Buy Last 4 digits of account number 6003 \$1,355.00 Nonpriority Creditor's Name Citicorp/Centralized Bankruptcy Opened 11/22/08 Last Active Po Box 790040 When was the debt incurred? 06/17 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.4 \$947.00 Comenitybank/coldwcmc Last 4 digits of account number 6446 Nonpriority Creditor's Name **Comenity Bank** Opened 01/10 Last Active Po Box 182125 When was the debt incurred? 6/02/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Deneen C Avery Case number (if know) 4.5 \$1,899.00 Kohls/Capital One Last 4 digits of account number 4523 Nonpriority Creditor's Name **Kohls Credit** Opened 11/99 Last Active Po Box 3043 When was the debt incurred? 11/15 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.6 Midland Funding Last 4 digits of account number 7028 \$8,470.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 07/16 Last Active Po Box 939069 When was the debt incurred? 11/15 San Diego, CA 92193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Factoring Company Account Citibank N.A., ☐ Yes Other. Specify Synchrony Bank, JC Penney, Sears 4.7 OneMain Last 4 digits of account number 7407 \$8,615.00 Nonpriority Creditor's Name Opened 09/15 Last Active Attn: Bankruptcy 601 Nw 2nd St When was the debt incurred? 5/24/17 Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Note Loan ☐ Yes

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| Synchrony Bank/Home Shopping | Last 4 digits of account number | 1970 | \$1,000.0 |
|---|--------------------------------------|--|-----------|
| Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 02/07 Last Active | |
| Po Box 956060 | When was the debt incurred? | 5/07/08 | |
| Orlando, FL 32896 | _ | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Charge Acc | count | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|-----------------------|-----|---|-----|----|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | otal Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | | | 0.00 |
| | J | you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 26,136.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 26,136.00 |
| | | | | | |

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| | | 1700.0000 | 111 FAUE 73 01 40 | |
|---------------------|--------------------------|-------------------|-------------------|-------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Deneen C Avery | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | Charle if this is |
| (II KIIOWII) | | | | Check if this is |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | Oity | | Olalo | Zii Couc | |
| | Name | | | | |
| | Number | Street | | | _ |
| | Number | Sileei | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| | | | | | |

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| | | | <u> </u> | 11 4() | |
|---|--|--|---|--|--|
| Fill in this i | nformation to identify your | case: | | | |
| Debtor 1 | Deneen C Avery | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Ormod Otato | be Barna aproy Court for the | | 0 | | |
| Case number (if known) | er | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106U | | | | |
| | Form 106H | obtoro | | | |
| Scheal | ule H: Your Cod | eptors | | | 12/15 |
| ■ No □ Yes 2. Withi Arizona ■ No. C □ Yes. 3. In Colu | , California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou | lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your | operty state or territor erto Rico, Texas, Wash with you at the time? | y? (Community propertington, and Wisconsin.) | ty states and territories include g with you. List the person shown he creditor on Schedule D (Official |
| | 06D), Schedule E/F (Official | | | | Schedule E/F, or Schedule G to fill |
| _ | olumn 1: Your codebtor ame, Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt |
| | · · · · · · · · · · · · · · · · · · · | | | | , |
| 3.1 N | ame | | | Schedule D, lin | |
| | | | | ☐ Schedule E/F, l ☐ Schedule G, lin | |
| - NI | umber Street | | | | |
| Ci | | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, lin | |
| N: | ame | | | ☐ Schedule E/F, | |
| _ | | | | ☐ Schedule G, lin | ne |
| N Ci | umber Street ity | State | ZIP Code | | |

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| Sil | in this information to | o identify your ca | 000 | | | | | 1 | | | | |
|--------------------|--|--------------------------------|--|----------------------------------|-------------------------|-----------------|----------------|---------------------|----------------------------|--|-----------------------------------|-----------------|
| | btor 1 | Deneen C Av | | | | | | | | | | |
| Del | btor 2 | Dolloon o A | | | | | | | | | | |
| | • | tcy Court for the: | NORTHERN DISTRIC | T OF ILLINOI | S | | | | | | | |
| (If kr | se number nown) fficial Form | 1061 | | | | | | | 13 income | ed filing ent showir as of the f | ng postpetition ollowing date: | chapter |
| | chedule I: ` | | omo | | | | | İ | MM / DD/ \ | YYYY | | 12/15 |
| sup spo atta | plying correct info use. If you are sep ch a separate shee | rmation. If you arated and you | ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition | ng jointly, and th you, do no | d your spo t include | use i inforr | s liv natio | ing witl on abou | h you, incl ut your spe | ude infori ouse. If m | mation about ore space is | your needed, |
| 1. | Fill in your emploinformation. | oyment | | Debtor 1 | | | | | Debtor 2 | 2 or non-f | iling spouse | |
| | If you have more attach a separate information about | page with | Employment status | ■ Employe | | | | | ☐ Empl | oyed mployed | | |
| | employers. | | Occupation | Help Desk | Attenda | nt | | | | | | |
| | Include part-time, self-employed wo | | Employer's name | Live Natio | n World | wide | | | | | | |
| | Occupation may i or homemaker, if | | Employer's address | 2000 West 1300 Houston, | - | | , Ste | • | | | | |
| | | | How long employed to | here? 2 | 2 Years | | | | _ | | | |
| Pai | rt 2: Give Det | tails About Mon | thly Income | | | | | | | | | |
| spoi | use unless you are | separated. | ate you file this form. If your than one employer, co | | | | | | | · | • | J |
| | e space, attach a se | | | | ,,,,, | | | ., | . mar poros | | | , |
| | | | | | | | | For De | ebtor 1 | | btor 2 or ing spouse | |
| 2. | | | ry, and commissions (be calculate what the monthly | | | 2. | \$ | ; | 5,560.32 | \$ | N/A | |
| 3. | Estimate and list | t monthly overti | me pay. | | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross | Income. Add lin | e 2 + line 3. | | | 4. | \$ | 5,5 | 560.32 | \$ | N/A | |

| Debt | or 1 | Deneen C Avery | _ | Case | number (if known) | | | |
|----------|-----------------------|---|-----------------|----------|-------------------|---------|----------------------|--------------|
| | | | | For | Debtor 1 | | ebtor 2 or | |
| | Cop | by line 4 here | 4. | \$ | 5,560.32 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,149.27 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 241.43 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 743.38 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 100.25 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: Accident Insurance | 5h.+ | \$ \$ | 8.19 | | N/A | |
| | | Group Legal Group Term Life | | \$ _ | 16.51 26.54 | \$ | N/A N/A | |
| | | Qualtranspretax | | \$ _ | 213.74 | \$ | N/A | |
| | | FSA / HSA | | \$_ | 166.66 | \$ | N/A | |
| 6. | ۸۵۵ | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ | | \$ | N/A | |
| o. 7. | | | 7. | э \$ | 2,665.97 | Φ \$ | | |
| | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | Φ — | 2,894.35 | Φ | N/A | |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | t 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 2 | 2,894.35 + \$_ | | N/A = \$ | 2,894.35 |
| 11. | Inclu othe Do r | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | r depend | , | , | | hedule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | 12. \$ | 2,894.35 |
| 13. | Do y ■ | you expect an increase or decrease within the year after you file this form No. Yes. Explain: | 1? | | | | Combin monthly | ed income |
| | ш | · oo. Explain | | | | | | |

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| Fill i | in this information to identify your cas | e: | | 1 | | |
|--------------|---|--|--|-----------------|---|--|
| Debt | tor 1 Deneen C Avery | | | Chec | k if this is: | |
| Debt (Spo | | | | | An amended filing A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| ` ' | ed States Bankruptcy Court for the: NO | RTHERN DISTRICT OF ILLIN | OIS | _ | MM / DD / YYYY | |
| | | CTTERIO DIOTRIOT OF TEETIN | | | WIIWI / DD / TTTT | |
| | e number nown) | | | | | |
| Of | fficial Form 106J | | | | | |
| | chedule J: Your Exp | | | | | 12/1 |
| info | as complete and accurate as possi ormation. If more space is needed, nber (if known). Answer every que | attach another sheet to this | | | | |
| Part | | | | | | |
| 1. | Is this a joint case? No. Go to line 2. | | | | | |
| | ☐ Yes. Does Debtor 2 live in a se | parate household? | | | | |
| | □ No | Official Form 106J-2, Expenses | for Sanarata House | ehold of Debt | or 2 | |
| _ | | • | Tor Separate House | eriola di Debi | 01 2. | |
| 2. | Do you have dependents? ■ N | _ | | | | |
| | Do not list Debtor 1 and You Debtor 2. | es. Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | | | | Yes |
| | | | | | | □ No □ Yes |
| | | | - | | | □ res |
| | | | | | | ☐ Yes |
| | | | | | | □ No |
| | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than | ■ No □ Yes | | | | |
| | yourself and your dependents? | La res | | | | |
| Esti exp | t 2: Estimate Your Ongoing Mo imate your expenses as of your ba lenses as of a date after the bankru licable date. | nkruptcy filing date unless y | | | | |
| the | lude expenses paid for with non-ca value of such assistance and have ficial Form 106I.) | | | | Your exp | enses |
| 4. | The rental or home ownership expayments and any rent for the ground | | nclude first mortgag | e 4. \$ | | 600.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or re | nter's insurance | | 4b. \$ | | 33.00 |
| | 4c. Home maintenance, repair, a | | | 4c. \$ | | 60.00 |
| 5 | 4d. Homeowner's association or | | mo oquity loons | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional mortgage payments for | n your residence, such as no | me equity loans | ე. ა | | 0.00 |

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| Debtor 1 | Deneen C Avery | | Case num | ber (if known) | |
|----------|--|--|--------------|----------------|------------------------|
| s. Util | ities: | | | | |
| 6a. | Electricity, heat, natural gas | | 6a. | \$ | 115.00 |
| 6b. | Water, sewer, garbage collection | | 6b. | \$ | 69.00 |
| 6c. | Telephone, cell phone, Internet, satellite, a | nd cable services | 6c. | \$ | 215.00 |
| 6d. | Other. Specify: | | 6d. | \$ | 0.00 |
| | od and housekeeping supplies | | 7. | · · — | 400.00 |
| | Idcare and children's education costs | | 8. | \$ | 0.00 |
| _ | thing, laundry, and dry cleaning | | 9. | \$ | 80.00 |
| | sonal care products and services | | 10. | \$ | 55.00 |
| | dical and dental expenses | | 11. | | 150.00 |
| | nsportation. Include gas, maintenance, bus o | or train for | 11. | Ψ | 150.00 |
| | not include car payments. | or train rate. | 12. | \$ | 220.00 |
| | ertainment, clubs, recreation, newspapers | . magazines, and books | 13. | · · | 0.00 |
| | aritable contributions and religious donation | = | 14. | · | 100.00 |
| | urance. | | | <u> </u> | 100.00 |
| | not include insurance deducted from your pay | or included in lines 4 or 20. | | | |
| | . Life insurance | | 15a. | \$ | 72.00 |
| | . Health insurance | | 15b. | · | 0.00 |
| | . Vehicle insurance | | 15c. | | 190.00 |
| | . Other insurance. Specify: | | 15d. | | 0.00 |
| | es. Do not include taxes deducted from your | nay or included in lines 4 or 20 | | | 0.00 |
| _ | ecify: | pay of moraded in inies 4 of 20. | 16. | \$ | 0.00 |
| | allment or lease payments: | | | · | |
| 17a | . Car payments for Vehicle 1 | | 17a. | \$ | 680.00 |
| 17b | . Car payments for Vehicle 2 | | 17b. | \$ | 0.00 |
| 17c | . Other. Specify: | | 17c. | \$ | 0.00 |
| 17d | . Other. Specify: | | 17d. | \$ | 0.00 |
| | ir payments of alimony, maintenance, and | | | | 0.00 |
| | lucted from your pay on line 5, Schedule I, | | 18. | · | 0.00 |
| | er payments you make to support others v | vho do not live with you. | | \$ | 0.00 |
| | ecify: | | 19. | | |
| | er real property expenses not included in I | lines 4 or 5 of this form or on <i>Sch</i> e | | | |
| | . Mortgages on other property | | 20a. | | 0.00 |
| | . Real estate taxes | | 20b. | · | 0.00 |
| | . Property, homeowner's, or renter's insuran | | 20c. | | 0.00 |
| 20d | . Maintenance, repair, and upkeep expenses | 5 | 20d. | \$ | 0.00 |
| 20e | . Homeowner's association or condominium | dues | 20e. | \$ | 0.00 |
| . Oth | er: Specify: | | 21. | +\$ | 0.00 |
| ادی (| culate your monthly expenses | | | | |
| | . Add lines 4 through 21. | | | \$ | 3,039.00 |
| | . Copy line 22 (monthly expenses for Debtor 2 | 2) if any from Official Form 106 L2 | | \$ | 3,033.00 |
| | | | | · | |
| 220 | . Add line 22a and 22b. The result is your mo | nuny expenses. | | \$ | 3,039.00 |
| . Cal | culate your monthly net income. | | | | |
| 23a | . Copy line 12 (your combined monthly incor | me) from Schedule I. | 23a. | \$ | 2,894.35 |
| 23b | . Copy your monthly expenses from line 22c | above. | 23b. | -\$ | 3,039.00 |
| | | | | | · · |
| 23c | . Subtract your monthly expenses from your | monthly income. | 220 | \$ | -144.65 |
| | The result is your monthly net income. | | 23c. | Ψ | -144.00 |
| 4 Do | you expect an increase or decrease in you | r expenses within the year after w | nu file this | form? | |
| | example, do you expect to finish paying for your car | | | | or decrease because of |
| | ification to the terms of your mortgage? | , , , , , , | 3-3-3 | . , | |
| | , , , | | | | |
| | | | | | |
| | (C). LAPIGITI HOTE. | | | | |

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| Debtor 1 | Deneen C Ave | ery | | |
|---------------------|-----------------------|-----------------------|-------------|-------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for th | ne: NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |
| (if known) | | | | ☐ Check if this is a amended filing |

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | Sign Below | | |
|----|---|-------|---|
| Di | d you pay or agree to pay someone who is NOT an attorney to | help | you fill out bankruptcy forms? |
| | No | | |
| | Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | der penalty of perjury, I declare that I have read the summary a tt they are true and correct. | and s | chedules filed with this declaration and |
| X | /s/ Deneen C Avery | Χ | |
| | Deneen C Avery | | Signature of Debtor 2 |
| | Signature of Debtor 1 | | |
| | Date August 1, 2017 | | Date |

Official Form 106Dec

| Fill i | n this inform | ation to identify you | r case. | | | |
|-----------------|---|--|---|---|---|---|
| Debt | | Deneen C Avery | | | | |
| Debi | .01 1 | First Name | Middle Name | Last Name | | |
| Debt | | First Name | Middle Neme | Loot Name | | |
| | se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case (if kno | e number wn) | | | | _ | Check if this is an amended filing |
| Sta Be as | s complete a | of Financial And accurate as possione space is needed, | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup | |
| numk Part | |). Answer every ques | stion. rital Status and Where You | Lived Refore | | |
| | | current marital statu | | LIVEU DEIOIE | | |
| | ☐ Married■ Not married | | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>ı</i> . | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor co, Texas, Washington and V | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Sch</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part | 2 Explain | n the Sources of You | r Income | | | |
| I | Fill in the total | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$33,361.89 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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Debtor 1 Deneen C Avery

| | | | | Debtor 1 | | Debtor 2 | | |
|----|--|---|---|--|---|--|---------------------------|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | or last calen anuary 1 to | | 31, 2016) | ■ Wages, commissions, bonuses, tips | \$54,039.00 | ☐ Wages, commonutes with the Wages, commonuses, tips | nissions, | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | or the calendanuary 1 to | | | ■ Wages, commissions, bonuses, tips | \$55,046.00 | ☐ Wages, comr bonuses, tips | nissions, | |
| | | | | ☐ Operating a business | | Operating a b | ousiness | |
| 5. | Include include and other winnings. List each s | come regard public bene If you are fi | dless of wheth fit payments; ling a joint cas the gross inco | e during this year or the two ler that income is taxable. Exa pensions; rental income; inter le and you have income that y ly me from each source separate | amples of other income are all test; dividends; money collect you received together, list it o | ed from lawsuits; r | royalties; and btor 1. | curity, unemployment, I gambling and lottery |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| Pa | rt 3: List | Certain Pa | ayments You | Made Before You Filed for I | Bankruptcy | | | |
| 6. | Are either ☐ No. | Neither Dindividual During the No. | ebtor 1 nor E primarily for a 90 days befo Go to line 7 | | Imer debts. Consumer debts d purpose." d you pay any creditor a total | of \$6,425* or mor | e? | |
| | | ☐ Yes * Subject | paid that cr not include | each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/19 and every 3 years | nts for domestic support obligations in the state of the | ations, such as chi | ild support ar | nd alimony. Also, do |
| | Yes. | | | r both have primarily consure you filed for bankruptcy, di | | of \$600 or more? | | |
| | | ■ No. | Go to line 7 | | | | | |
| | | ☐ Yes | include pay | each creditor to whom you pai ments for domestic support ol this bankruptcy case. | | | | |
| | Creditor' | s Name an | d Address | Dates of payme | nt Total amount | Amount you | Was this p | ayment for |

still owe

paid

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| Debtor 1 | Deneen C Avery | Document | Page 32 of 46 | e number (if known) | | |
|-------------------|---|--|---|--|--------------------------------|--|
| | | | | | | |
| <i>Insid</i> of w | nin 1 year before you filed for bankrupt ders include your relatives; any general pa hich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony. | artners; relatives of any ge a control, or owner of 20% | neral partners; partners or more of their voting | rships of which you securities; and ar | u are a gener ly managing a | al partner; corporations agent, including one for |
| = | No | | | | | |
| Ш | Yes. List all payments to an insider. | | | | | |
| Ins | ider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| insid | nin 1 year before you filed for bankrupt der? ude payments on debts guaranteed or cos | | yments or transfer a | ny property on ad | count of a d | lebt that benefited an |
| | Yes. List all payments to an insider | | | | | |
| Ins | ider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment ditor's name |
| Part 4: | Identify Legal Actions, Repossession | Г | | | | |
| mod □ ■ | all such matters, including personal injury lifications, and contract disputes. No Yes. Fill in the details. | | | ., , | | · |
| | se title se number | Nature of the case | Court or agency | | Status of the | ne case |
| Av | dland Funding LL v. Deneen ery 17-M6-004688 | | Cook County C Markham 16501 Kedzie <i>A</i> Markham, IL 60 | ve | ■ Pending □ On app | eal |
| Che | nin 1 year before you filed for bankrupt ck all that apply and fill in the details below | | perty repossessed, f | oreclosed, garnis | hed, attache | d, seized, or levied? |
| | No. Go to line 11. Yes. Fill in the information below. | | | | | |
| _ | editor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happene | ed | | | property |
| | nin 90 days before you filed for bankru ounts or refuse to make a payment bec | | cluding a bank or fir | ancial institution | , set off any | amounts from your |
| | No | | | | | |

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

■ No

Yes. Fill in the details.Creditor Name and Address

☐ Yes

Amount

Date action was

taken

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Case number (if known) Document Debtor 1 Deneen C Avery

| Pai | tt 5: List Certain Gifts and Contribution | ns | | | | | | |
|-----|---|-----------|---|---|---|--|--|--|
| 13. | Within 2 years before you filed for bank | cruptcy, | did you give any gifts with a total value of more t | han \$600 per person | ? | | | |
| | No | | | | | | | |
| | ☐ Yes. Fill in the details for each gift. | | | | | | | |
| | Gifts with a total value of more than \$6 per person | 600 | Describe the gifts | Dates you gave the gifts | Value | | | |
| | Person to Whom You Gave the Gift an Address: | d | | | | | | |
| 14 | Within 2 years before you filed for bank | cruptev. | did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? | | | |
| | ■ No | артоу, | and you give any gives or commodutions with a tou | ii raido oi moro man | toos to any onanty i | | | |
| | ☐ Yes. Fill in the details for each gift or | contribut | tion. | | | | | |
| | Gifts or contributions to charities that more than \$600 | total | Describe what you contributed | Dates you contributed | Value | | | |
| | Charity's Name Address (Number, Street, City, State and ZIP Co | de) | | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankr | uptcv or | since you filed for bankruptcy, did you lose any | thing because of the | t. fire. other disaster. | | | |
| | or gambling? | , | , | g | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | ■ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Describe the property you lost and | Descr | ibe any insurance coverage for the loss | Date of your | Value of property | | | |
| | how the loss occurred | Include | e the amount that insurance has paid. List pending | loss | lost | | | |
| | | insura | nce claims on line 33 of Schedule A/B: Property. | | | | | |
| Pai | rt 7: List Certain Payments or Transfe | rs | | | | | | |
| 16. | Within 1 year before you filed for bankr | uptcv. d | id you or anyone else acting on your behalf pay | or transfer any prope | rtv to anvone vou | | | |
| | consulted about seeking bankruptcy or | r prepari | | | | | | |
| | _ | p p | | , - , · | | | | |
| | No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was | Amount of payment | | | |
| | Email or website address | V | | made | 1.3 | | | |
| | Person Who Made the Payment, if Not Lynch Law Offices, P.C. | You | \$375.00 | 07/06/2017 | \$375.00 | | | |
| | 1011 Warrenville Road, Ste. 150 | | 4373.00 | 01/00/2017 | φ373.00 | | | |
| | Lisle, IL 60532 | | | | | | | |
| | Summit Financial Education | | \$14.95 for Credit Counseling Course | July 19, 2017 | \$14.95 | | | |
| | 4800 W. Flower Street Tucson, AZ 85712 | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 17. | promised to help you deal with your cro Do not include any payment or transfer the | editors o | | or transfer any prope | rty to anyone wno | | | |
| | _ | | | | | | | |
| | ■ No No Ves Fill in the details | | | | | | | |
| | - 100.1 iii iii tilo dotallo. | | Description and value of any preparty | Data navement | Amaiint of | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | |
| | | | | illaue | | | | |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

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Case number (if known) Document

Debtor 1 **Deneen C Avery**

| | transferred in the ordinary course of your be include both outright transfers and transfers m include gifts and transfers that you have alread No | ade as security (such as | the granting of a | security into | erest or mortgage on you | r property). Do not | |
|-----|--|---|----------------------------|---------------|---|---|--|
| | ☐ Yes. Fill in the details. | | | | | | |
| | Person Who Received Transfer Address | Description and property transfer | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | |
| | Person's relationship to you | | | paid ii | i exchange | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre No □ Yes. Fill in the details. | | ny property to a | self-settled | d trust or similar device | of which you are a | |
| | Name of trust | Description and | value of the prop | perty trans | ferred | Date Transfer was | |
| | | | | | | made | |
| Pai | t 8: List of Certain Financial Accounts, In | struments, Safe Depos | it Boxes, and St | orage Units | S | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, | | | | | | |
| | houses, pension funds, cooperatives, asso No Yes. Fill in the details. | | | | , shares in banks, creat | t unions, brokerage | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit | or place other than you | r home within 1 | year befor | e you filed for bankrupt | cy? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility | Who else has or | had access | Describe t | the contents | Do you still | |
| | Address (Number, Street, City, State and ZIP Code) | to it? Address (Number, State and ZIP Code) | | | | have it? | |
| Pa | t 9: Identify Property You Hold or Control | I for Someone Else | | | | | |
| 23. | Do you hold or control any property that so for someone. | omeone else owns? Inc | lude any propert | ty you borr | owed from, are storing | for, or hold in trust | |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | Value | |
| Pa | + 10. Give Details About Environmental Inf | armatian | | | | | |

rt 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

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Debtor 1 Deneen C Avery

regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Date of notice Environmental law, if you Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Case Title Nature of the case Status of the **Case Number** Name case Address (Number, Street, City State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name Employer Identification number** Describe the nature of the business Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below.

Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Date Issued

Official Form 107

(Number, Street, City, State and ZIP Code)

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with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Deneen C Avery

Deneen C Avery

Signature of Debtor 2

Signature of Debtor 2

Date

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this info | rmation to identify your | case: | | | |
|-------------------------------------|--|-----------------------|---|----------------------------|---|
| Debtor 1 | Deneen C Avery | | | | |
| Dahtano | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | Bankruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| 000 : 15 | 400 | | | | |
| Official Fo | | | | | |
| Stateme | nt of Intentio | n for Indiv | iduals Filing Unde | r Chapter / | 12/15 |
| If you are an inc | dividual filing under cha | pter 7. vou must fil | out this form if: | | |
| | ve claims secured by yo | - | | | |
| | ased personal property a | | | | |
| which | | | you file your bankruptcy petition or e time for cause. You must also ser | | |
| | people are filing togethe and date the form. | r in a joint case, bo | th are equally responsible for supp | lying correct informat | ion. Both debtors must |
| Be as complete | and accurate as possib | le. If more space is | needed, attach a separate sheet to | this form. On the top | of any additional pages, |
| | your name and case nur | | , | | , |
| Part 1: List | Your Creditors Who Hav | e Secured Claims | | | |
| 1. For any cred | itors that vou listed in Pa | art 1 of Schedule D | : Creditors Who Have Claims Secu | red by Property (Offici | ial Form 106D), fill in the |
| information b | • | | What do you intend to do with th | | Did you claim the property |
| identity the c | reditor and the property t | nat is conateral | secures a debt? | | is exempt on Schedule C? |
| | | | | | |
| Creditor's | Capital One Auto Fina | ance | ☐ Surrender the property. | Γ | □No |
| name: | | | Retain the property and redeem | | ■ .v |
| Description of | of 2014 Honda Accor | d 36,360 | Retain the property and enter in Reaffirmation Agreement. | to a | Yes |
| property | miles | lub 45 | Retain the property and [explain | ı]: | |
| securing deb | t: Value Via CarMax 2017 | on July 15, | | | |
| Dowt Or Lint | Varia Haarinina d Danaana | I Duamantu I aaaa | | | |
| | Your Unexpired Persona red personal property le | | in Schedule G: Executory Contract | s and Unexpired Leas | es (Official Form 106G), fill |
| in the informati | on below. Do not list rea | al estate leases. Un | expired leases are leases that are s he trustee does not assume it. 11 L | still in effect; the lease | |
| Describe your | unexpired personal pro | perty leases | | Will th | ne lease be assumed? |
| Lessor's name: | • | | | П | |
| Lessor's name: Description of le | | | | □ No |) |
| Property: | | | | ☐ Ye | es |
| Lessor's name: | | | | □ No |) |
| Description of le Property: | eased | | | □ Ye | 25 |
| . , | | | | ப 16 | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Del | btor 1 | Deneen C Avery | Case number (if known) |
|-----|---------------------|--|---|
| | | | |
| | ssor's n | | □ No |
| | scription perty: | n of leased | ☐ Yes |
| Les | ssor's n | ame: | □ No |
| | scription perty: | n of leased | ☐ Yes |
| | ssor's n | | □ No |
| | scription perty: | n of leased | ☐ Yes |
| | ssor's n | | □ No |
| | scription perty: | n of leased | ☐ Yes |
| | ssor's n | | □ No |
| | scription perty: | n of leased | ☐ Yes |
| Par | rt 3: | Sign Below | |
| | | alty of perjury, I declare that I have indica nat is subject to an unexpired lease. | d my intention about any property of my estate that secures a debt and any personal |
| X | | eneen C Avery | X |
| | | een C Avery sture of Debtor 1 | Signature of Debtor 2 |
| | Date | August 1, 2017 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte | r 7: | Liquidation |
|--------|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-23289 Doc 1 Filed 08/04/17 Entered 08/04/17 08:28:07 Desc Main Document Page 43 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Deneen C Avery | | Case No. | | |
|-------------|--|---|------------------------|-----------------------|----------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | NEY FOR DE | BTOR(S) | |
| C | cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the filter e rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, o | or agreed to be paid t | o me, for services re | |
| | For legal services, I have agreed to accept | | \$ | 900.00 | |
| | Prior to the filing of this statement I have received | | \$ | 0.00 | |
| | Balance Due | | | 900.00 | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | |
| 3. T | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. T | The source of compensation to be paid to me is: | | | | |
| | • | Legal Services | | | |
| 5. I | I have not agreed to share the above-disclosed com | _ | nless they are memb | ers and associates o | f my law firm. |
| [| ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement. | | | | aw firm. A |
| 6. I | n return for the above-disclosed fee, I have agreed to | render legal service for all aspects | of the bankruptcy ca | ase, including: | |
| b c | Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] | atement of affairs and plan which | may be required; | | cruptcy; |
| 7. B | By agreement with the debtor(s), the above-disclosed for | ee does not include the following | service: | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of a inkruptcy proceeding. | ny agreement or arrangement for p | payment to me for re | presentation of the o | lebtor(s) in |
| Αι | ugust 1, 2017 | /s/ Steven L Walke | er | | |
| | ite | Steven L Walker 6 Signature of Attorney | 325928 | | |
| | | Lynch Law Offices | s, P.C. | | |
| | | 1011 Warrenville F Lisle, IL 60532 | Road, Ste. 150 | | |
| | | 630-960-4700 Fax | :: 630-324-7131 | | |
| | | SWalker@Lynch4 | | | |
| | | Name of law firm | | | _ |

United States Bankruptcy CourtNorthern District of Illinois

| | | Tior therm District or Inmiors | | |
|-------|--|---------------------------------------|-------------------------------|----------------|
| In re | Deneen C Avery | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | VE | CRIFICATION OF CREDITOR | MATRIX | |
| | | Number o | of Creditors: | 11 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | litors is true and correct to | the best of my |
| Date: | August 1, 2017 | /s/ Deneen C Avery Deneen C Avery | | |

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank/Best Buy Citicorp/Centralized Bankruptcy Po Box 790040 Saint Louis, MO 63179

Comenity Bank Comenity Bank Po Box 182125 Columbus, OH 43218

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Internal Revenue Service (IRS) PO Box 7346 Philadelphia, PA 19101-7346

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Midland Funding Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

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OneMain Attn: Bankruptcy 601 Nw 2nd St Evansville, IN 47708

Synchrony Bank/Home Shopping Attn: Bankruptcy Po Box 956060 Orlando, FL 32896